



Mississippi Rural Health Association
Mississippi Office of Rural Health,
and Mississippi Area Health Education Centers

Crossroads



Volume 2, Issue 2

Spring 2006

Special points of interest:

Give your recommendations for revamping the healthcare system to Congress and the President (see page 5)

Several important conferences are scheduled for the coming months (see pages 3, 5 and 6)

Our new sponsor:



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From the MRHA president's pen

I am pleased to be able to write to you for the first time as president of the Mississippi Rural Health Association. As a long-time Mississippi resident and a "certified" member of the sandwich generation, I am continually reminded of the great needs of our state in the realm of health, particularly in rural regions. It is, however, so encouraging being part of an organization that has at its heart fostering positive changes in Mississippi's rural health situation. It is my hope that by joining together, we can see significant progress toward this goal. I encourage each of you to become actively involved in the process as we move forward together.

One way to become involved is through participation in the MRHA listserv. The listserv is designed to provide an open forum for the exchange of information and ideas in a timely way. Anyone within the listserv can post a message to the group. I encourage you to use the tool to ask questions, post opportunities, and stay up-to-date on news releases relevant to rural health. (Contact Bonnie

Carew at (662) 325-1321 or bonniec@ext.msstate.edu if you would like to be added to the listserv.)

Within this issue is information on another opportunity to become more involved in rural health. The third annual Southern Regional Rural Healthcare Conference is just a few weeks away. This joint effort between Alabama, Louisiana, and Mississippi Rural Health Associations is growing stronger each year.



Rachel Welborn, President
Mississippi Rural Health
Association 2006-2007

Mark your calendars now to be among the participants on June 4-6 at Pearl River Resort in Choctaw, Mississippi.

Conferences like this and the MRHA listserv are great examples of networking opportunities provided by the MRHA. It is this type of networking that recently resulted in a productive collaboration between the MRHA and Mississippi's Area Health Education Centers. I am pleased to announce that with this issue, the Mississippi Area Health Education Centers join the MRHA and the Mississippi Office of Rural Health in sponsoring this newsletter. We welcome the collaboration and look forward to reaping the benefits of working together for the good of rural Mississippians.

Please take a moment to read through the information provided and join with us in helping to move our state forward toward better health. If you have any questions about MRHA and how to be more involved in the efforts, please feel free to contact me. The number at the MRHA office is (601) 989-3001.

From the MORH director's desk

I sit here reliving my family's recent experience when one of my dear siblings had to be rushed to the local hospital at three o'clock in the morning. My brother had

tremendous difficulty breathing which we later learned was caused by a reaction to medication coupled with the discovery of a peanut allergy (a food in which he has been

indulging for nearly thirty years). My youngest brother is now fine and my entire family is very grateful to the ER staff that provided the (continued on page 2)

From the director's desk (continued)

(continued from page 1)
appropriate required emergency medical services he needed.

As I ponder these events, I again realize the importance of the activities and initiatives of the Mississippi Office of Rural Health (MORH) for citizens who reside in rural communities. It is crucial that those of us involved with rural health policy continue to provide 100% effort towards achieving and enhancing adequate health care in rural communities.

The MORH has worked for many years and continues to work with the Mississippi Department of Health's Bureau of Emergency Medical Services (under the leadership of Keith Parker) to enhance EMS services in rural Mississippi. The MORH has expended over \$260,000 towards this effort, assisted 15 small rural hospitals with acquisition of computer hardware for participation in the state's trauma care system and with data reporting, and provided scholarships for 39 Mississippians

to earn associate degrees from paramedic training programs.

I am pleased to inform you that the state's efforts over the years have resulted in the 27 Critical Access Hospital counties having an average emergency response time of 7.17 minutes. Mississippi's response time for these 27 counties is better than the national Healthy People 2010 goal of a 10-minute response time.

The Acute Care Nurse Practitioner Emergency Telemedicine project for small rural hospital emergency rooms is another initiative in which the MORH is engaged to ensure adequate emergency services. This project will be highlighted in the next issue of *Crossroads*.

For those of you attending the National Rural Health Association Annual Meeting in May, please be advised that on Tuesday, May 16, during the keynote session, the MORH will provide a presentation on Hurricane Katrina.

In closing, I would like to announce

that Sherry Stephens-Gibson has joined the Mississippi Office of Rural Health staff. Ms. Gibson has a master's degree in public health and has worked in healthcare and public health for the past six years.

Please join me in welcoming Sherry.



Rozelia Harris, MBA, Director
Mississippi Office of Rural Health

The Baxter International Health Recovery Fund

On February 1, 2006, The Foundation for the Mid South announced its receipt of a grant from The Baxter International Foundation to establish a health recovery fund to aid disaster restoration efforts of community-based health organizations in the mid-south region of the United States.

The Baxter International Foundation Health Recovery Fund will provide grants to community-based health care clinics, nonprofits, and other community-based health services that are delivered by other organizations including hospices, nursing homes, home health or visiting nurse agencies, domestic violence and child abuse organizations, mental health clinics, dental clinics, senior citizen organizations, youth service organizations, substance abuse treatment organizations, disability services, physical/occupational therapy clinics, and family centers. The Fund is designed to provide grants to support local healthcare professionals' efforts to

restore their clinics and to reestablish their services to families and communities in need.

The grant provides a total of \$750,000 to be available in two rounds through the fund. A competition was held for \$250,000 in Recovery Grants, and applications were due by March 1, 2006. A competition for an additional \$500,000 in Restoration Grants is yet to be held.

Necole Irvin, Program Officer for the Foundation for the Mid South, stated she expects more than the initial \$500,000 to be available for Restoration Grants, as other funders have expressed an interest in supporting these efforts.

Health service organizations are invited and encouraged to submit grant applications through a competitive grant process that will be announced later this year and managed by the Foundation for the Mid South in Jackson, Mississippi. Applicants should visit the Foundation's

Web site at www.fndmidsouth.org to watch for the request for proposals.

The Baxter International Foundation, the philanthropic arm of Baxter International Inc., helps organizations increase access to healthcare in the United States and around the world. The Foundation, established in 1981, began to focus exclusively on increasing access to healthcare in 2002 – particularly for the disadvantaged and underserved – in and near communities where Baxter employees live and work.

The Foundation for the Mid South is a not-for-profit, regional development foundation that invests in people and strategies that build philanthropy and promote racial, social, and economic equity in Arkansas, Louisiana, and Mississippi.

For more information about the up-coming competition for Restoration Grants, you may contact Necole Irvin, Project Officer at nirvin@fndmidsouth.org.

Mississippi Area Health Education Center hosts health careers summer camp

The Mississippi Area Health Education Center, in partnership with the Mississippi Hospital Association, is offering a great opportunity for high school junior and senior students in AHEC service areas. Students from these areas are invited to participate in health career summer camps hosted by the Mississippi Band of Choctaw Indians AHEC and the Delta AHEC.

The Health Careers Awareness Camp is a five-day summer enrichment program designed to offer students an opportunity to learn more about health care professions through a series of activities and active participation at local hospitals in Mississippi. The camps will be held at Mississippi Delta Community College from June 4-9, 2006 and the Mississippi Band of Choctaw Indians Reservation from June 18-24, 2006.

The students' daily work routine includes daily presentations by speakers, group exercises and rotations through different clinical sites. All students are expected to attend every day of the camp.

For more information, please contact Ms. Morgan Ben (Mississippi Band of

Choctaw Indians AHEC) at (601) 663-7693 or Mr. Robert Bell (Delta AHEC) at (662) 822-2852.

Area Health Education Centers (AHECs) were begun by the federal government in the late 1970s as programs designed to address health manpower distribution through community-based initiatives.

The AHEC program was begun in Mississippi in 1998 following the receipt of a grant to the University of Mississippi Medical Center from the Health Resources and Services Administration (HRSA).

• The **State Program Office** is located in the Jackson Medical Mall Thad Cochran Center. It serves as a link between the

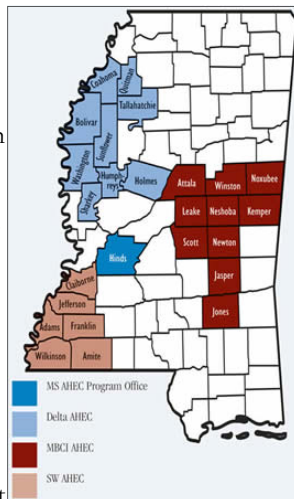
rural community centers and the University of Mississippi Medical Center.

• The **Delta AHEC** is located in Greenville and covers Coahoma, Quitman, Bolivar, Tallahatchie, Washington, Sunflower, Humphreys, Holmes, and Sharkey counties in the northwestern part of the state.

• The **Southwest Mississippi AHEC** is located in Natchez and covers Claiborne, Jefferson, Adams, Franklin, Wilkinson, and Amite counties in the southwestern part of the state. Their office is located at Alcorn State University School of Nursing.

• The **Mississippi Band of Choctaw Indians AHEC** is located in Philadelphia and covers Attala, Winston, Noxubee, Leake, Neshoba, Kemper, Scott, Newton, Jasper, and Jones counties. The center is administrated by the Choctaw Department of Family and Community Services and is the only AHEC in the United States located on an American Indian Reservation.

Currently, plans are being made to develop additional centers to provide AHEC programs for all Mississippi counties.



Funding Opportunities Web Sites

www.raconline.org—The Rural Assistance Center is a collaborative effort of the University of North Dakota Center for Rural Health, and the Rural Policy Research Institute (RUPRI); and is funded by a grant through HRSA's Office of Rural Health Policy. RAC provides a variety of information related to: Upcoming Events, Recent Rural Health News, and Funding Opportunities.

www.fndmidsouth.org—The Foundation for the Mid South is a regional development foundation that brings people and multiple resources together to strengthen communities. By working with people with a wide range of resources, skills, and talents, the Foundation for the Mid South strives to nurture families and children, improve schools, and build the economy for all people in Arkansas, Louisiana, and Mississippi. The Foundation also has a health initiative.

Rural health information technology conference to be held

Attention rural providers! Plan now to attend the Health Resources and Services Administration's Federal Office of Rural Health Policy's first ever national meeting on rural health information technology (HIT).

Health IT: A Rural Provider's Roadmap to Quality will be held September 21-23, 2006, at the Kansas City Downtown Marriott in Kansas City, Missouri. In an effort to explore the benefits of health information technology adoption and its link to quality improvement, this conference will provide an opportunity for rural providers to learn

about the basic components of HIT, to focus on the initial steps of strategic planning for HIT investments, to understand how to find appropriate technology to meet individual quality aims, and to share best practices and lessons learned about HIT implementation.

Through interactive workshops, face-to-face contact with vendors, and networking with rural providers who have made HIT work, this three-day conference will provide a great opportunity for you to learn more about making an HIT investment to help achieve your quality improvement goals.

The meeting seeks to attract rural health care providers, including small physician practices, critical access hospitals, small rural hospitals, Federally Qualified Health Centers, and rural health clinics, as well as vendors interested in serving rural health care providers.

Don't wait! In order to make the conference accessible for all, there is no registration fee for the first 300 providers to register and reduced rates for additional participants. The on-line registration will be available April, 2006. For additional information, go to <http://ruralhealth.hrsa.gov/HITMeeting.asp>.

Mississippi's Critical Access Hospitals—"Life-savers for Rural Communities"

As part of the Balanced Budget Act of 1997, Congress authorized the Medicare Rural Hospital Flexibility Program (FLEX). The purpose of the FLEX Program is to help sustain the rural healthcare infrastructure, with Critical Access Hospitals (acute care facilities that provide outpatient, emergency and limited inpatient services, and are recognized as a provider type eligible for cost-based Medicare reimbursement) as the hub of an organized system of care, through mechanisms of the program. These mechanisms include the State Rural Health Plan, CAHs, Networks, Quality Improvement and EMS initiatives. Additionally, the FLEX Program must foster collaborative relationships for referral and support that allows rural Medicare beneficiaries to maintain access to high quality care.

Critical Access Hospitals have proven to be life-savers for many rural communities across America. The first Mississippi CAH became operational in 2000, and currently there are 28 in the state.

The legislation establishing the Medicare Rural Hospital Flexibility Program provided states the flexibility to conduct activities that each determined would help achieve the goals of the program in their respective state. The Mississippi Office of Rural Health partners with the Mississippi Hospital Association (MHA) to carry out FLEX Program activities. Mendal Kemp, who works with the MHA, is the State FLEX

Coordinator. The following highlights some of the state's FLEX activities:

Designation of CAHs in Mississippi

- Financial feasibility studies
- FLEX program staff working with, and providing information to communities
- Provision of model network agreements and policies
- Mock surveys to help prepare hospitals for CAH certification and re-certification

Development and Support of Rural Health Networks

- Establishment of the Delta Rural Health Network
- Community planning projects to engage rural communities in healthcare needs assessments, decision-making, and system development
- Facilitating CAH/FQHC meetings to foster local coordination of effort
- Assisting CAHs with obtaining written referral arrangements with larger hospitals

EMS Improvements

- Over \$220,000 made available to associate degree programs for EMT Paramedic Training to meet identified local needs of EMT manpower shortages
- Mini-grants to CAH hospital-based ambulance services
- Acquisition of computer hardware for 15 hospitals to participate in the state's trauma care system

Support and assistance for existing CAHs

- Educational meetings and training/annual conferences
- Quarterly meetings of CAH administrators
- Assistance with implementation/or support of Balanced Scorecard projects
- Coding services and charge master revision and analysis to improve hospitals' economic viability

Improvements in Quality of Care

- Automated Pharmacy Management Systems to reduce medication errors
- Scholarships for nurse practitioners to acquire acute care coursework and certification
- Participation in UMC's ER Telemedicine Project to help CAHs improve ER capability
- Collaboration with Information and Quality Healthcare (IQH) to assist CAHs in establishing and monitoring clinical indicators

According to recent evaluations conducted by IQH, Mississippi's CAH rates as a peer group compared to all other Mississippi acute hospitals were as good or better than the other hospitals for the same reporting period for several key indicators.

These healthcare facilities are not only important for residents' health but they also play a major role in the community's economy. Economic impact analysis indicated an impact in excess of \$10 million annually for some communities.

Be certain to become familiar with and support the CAH in your area.

Mississippi's Critical Access Hospitals

Choctaw County Medical Center

Ackerman, MS

Field Memorial Hospital

Centreville, MS

Hancock County Medical Center

Bay St. Louis, MS

Jefferson Davis Community Hospital

Prentiss, MS

Lawrence County Hospital

Monticello, MS

Noxubee General Hospital

Macon, MS

Pontotoc Health Services

Pontotoc, MS

Scott Regional Hospital

Morton, MS

Tallahatchie General Hospital

Charleston, MS

Claiborne County Hospital

Port Gibson, MS

Greene County Hospital

Leakesville, MS

Hardy Wilson Memorial Hospital

Hazlehurst, MS

King's Daughters Hospital

Yazoo City, MS

Leake Memorial Hospital

Carthage, MS

Perry County Hospital

Richton, MS

Quitman County Hospital

Marks, MS

Simpson County Hospital

Mendenhall, MS

Tyler Holmes Memorial Hospital

Winona, MS

Walsh County General Hospital

Tylertown, MS

Covington County Hospital

Collins, MS

H.C. Watkins Memorial Hospital

Quitman, MS

Humphreys County Memorial Hospital

Belzoni, MS

Laird Hospital

Union, MS

North Sunflower County Hospital

Ruleville, MS

Pioneer Community Hospital

Aberdeen, MS

S.E. Lackey Hospital

Forest, MS

Stone County Hospital

Wiggins, MS

University Hospital-Holmes County

Lexington, MS

Second annual AHEC symposium to be held August 24 in Jackson

The Mississippi Area Health Education Center is pleased to announce its second annual symposium, "The Community Health Worker: Bridging the Gap between Healthcare Providers and the Community," to be held Thursday, August 24, 2006.

Topics for discussion will include the role of community health workers in the delivery of health care services and the implementation of telehealth/telemedicine networks in order to facilitate the delivery of health care services in rural settings.



The symposium location will be the University of Mississippi Conference Center, Jackson Medical Mall, 350 West Woodrow Wilson Drive, Jackson, Mississippi.

For more information regarding the symposium, please contact Ms. Sandra Hayes, Program Coordinator for the Mississippi Area Health Education Center Program Office at (601) 815-5379 or SCHayes@familymed.umsmed.edu.

2006 Southern Regional Rural Healthcare Conference to be held June 4 - 6

The 3rd Annual Southern Regional Rural Healthcare Conference will be held June 4-6 in Choctaw, Mississippi at the Pearl River Resort. The conference is sponsored by the rural health associations of Alabama, Louisiana, and Mississippi.

The meeting agenda and registration will be distributed in the near future. The event will start with a golf scramble at The Dancing Rabbit Golf Club, located within the resort on June 4. On Monday, June 5, 2006 the one and a half-day educational event will begin. The agenda will provide direction for

current and new challenges, allow for updates pertinent to the delivery of health care on the state and legislative levels, and allow for learning and networking opportunities with peers and vendors alike.

For more information, contact the Louisiana Rural Health Association of fice at (985) 369-3813 or email Erin Watson at watson@lrha.org.

A block of rooms has been reserved at the Pearl River Resort Silver Star Hotel and special rates will be offered to all conference participants. These rates are offered on Friday, June 2 (\$99);

Saturday, June 3 (\$124); Sunday, June 4 (\$65); and Monday, June 5 (\$65).

Sleeping rooms and all meetings will be at the Silver Star Hotel at the resort. Rooms are limited, so early reservations are highly recommended. Make your reservations by calling the resort directly at (866) 447-3275. The group code must be identified while making reservations in order to secure the group rate. The group code is **LARH606**. All reservations must be received by Friday, May 19, 2006, under this room block to obtain the conference rate.

We hope to see you there!

A chance for you to give your recommendations to Congress

The Citizens' Health Care Working Group (a congressionally-mandated group of ordinary citizen volunteer members) invites you to take part in a nationwide dialogue that will lead to recommendations to the President and the Congress on what we want in order to create a health care system that works for all Americans.

Mississippi has been one of 15 states participating in this national dialogue. Dr. Aaron Shirley, a Mississippi physician, was selected as part of the Task Force that will oversee this process nationally. His leadership has helped open the door to this privilege for our state.

Mississippi community meetings were held in Clarksdale, Greenville, Jackson, Wesson Co-Lin Community College, Verona/Tupelo, Starkville, Newton, and

Hattiesburg. Mississippi is the only state that held listening sessions in rural areas.

Reports from our state's meetings will be posted in the next few weeks. A wealth of great comments and suggestions have emerged from the sessions.

What can you do to take part in this dialogue?

- Visit the group's Web site, www.CitizensHealthCare.gov, and learn about health care and this nationwide dialogue.
- Vote and write your opinions online at the Public Comment Center, http://www.citizenshealthcare.gov/speak_out/comment.php, and complete the Health Care Poll or the other comment features.
- Get vocal and participate in the

National Online Discussion about Health Care. Go national with your opinions about health care in America by visiting

www.AmericansDiscussHealth.org.

- Watch the recent live Web cast, "What's Your Health Worth?" archived at <http://www.umich.edu/healthmeeting/>.
- Weigh in on the draft recommendations; return to the main Web site, www.CitizensHealthCare.gov later this summer and express your opinions regarding the draft recommendations being prepared for the President and Congress.

Your opinions do matter; this is an opportunity for direct participatory democracy. Please take advantage of it.

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*A voice for health
in rural Mississippi*

We're on the Web!
<http://www.msrha.org>

National Rural Health Association 2006 Annual Conference Week

13th Annual Rural Minority and Multicultural Health Conference

*"Kaleidoscope of Rural Minority
and Multicultural Health Care Issues"*

May 15-16, 2006

Rural Medical Educators Meeting May 16, 2006

29th Annual Conference

"Pioneering New Frontiers"

May 17-19

Nugget Hotel • Reno, NV



Mississippi Partnership for Comprehensive Cancer Control Symposium

Chronic Disease and Injury Prevention Conference

Jackson Hilton Convention Center

May 24-26, 2006

Sponsored by The Mississippi Department of Health &
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